

Fill in this information to identify the case:

Debtor Sanitary and Improvement District No. 10,
Washington County, Nebraska
United States Bankruptcy Court for the: _____ District of NE
(State)

Check if this is an amended filing

Official Form 206E/F

Schedule E/F: Creditors Who Have Unsecured Claims

12/15

Be as complete and accurate as possible. Use Part 1 for creditors with PRIORITY unsecured claims and Part 2 for creditors with NONPRIORITY unsecured claims. List the other party to any executory contracts or unexpired leases that could result in a claim. Also list executory contracts on *Schedule A/B: Assets - Real and Personal Property* (Official Form 206A/B) and on *Schedule G: Executory Contracts and Unexpired Leases* (Official Form 206G). Number the entries in Parts 1 and 2 in the boxes on the left. If more space is needed for Part 1 or Part 2, fill out and attach the Additional Page of that Part included in this form.

Part 1: List All Creditors with PRIORITY Unsecured Claims

1. Do any creditors have priority unsecured claims? (See 11 U.S.C. § 507).

No. Go to Part 2.
 Yes. Go to line 2.

2. List in alphabetical order all creditors who have unsecured claims that are entitled to priority in whole or in part. If the debtor has more than 3 creditors with priority unsecured claims, fill out and attach the Additional Page of Part 1.

2.1 Priority creditor's name and mailing address		Total claim	Priority amount
<p>_____ _____ _____</p>		As of the petition filing date, the claim is: \$ _____	\$ _____
		Check all that apply.	
		<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	
Date or dates debt was incurred		Basis for the claim:	
<p>_____ _____ _____</p>		<p>_____</p>	
Last 4 digits of account number		Is the claim subject to offset?	
<p>_____</p>		<input type="checkbox"/> No <input type="checkbox"/> Yes	
Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (_____)			
2.2 Priority creditor's name and mailing address		As of the petition filing date, the claim is: \$ _____	
<p>_____ _____ _____</p>		Check all that apply.	
		<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	
Date or dates debt was incurred		Basis for the claim:	
<p>_____ _____ _____</p>		<p>_____</p>	
Last 4 digits of account number		Is the claim subject to offset?	
<p>_____</p>		<input type="checkbox"/> No <input type="checkbox"/> Yes	
Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (_____)			
2.3 Priority creditor's name and mailing address		As of the petition filing date, the claim is: \$ _____	
<p>_____ _____ _____</p>		Check all that apply.	
		<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed	
Date or dates debt was incurred		Basis for the claim:	
<p>_____ _____ _____</p>		<p>_____</p>	
Last 4 digits of account number		Is the claim subject to offset?	
<p>_____</p>		<input type="checkbox"/> No <input type="checkbox"/> Yes	
Specify Code subsection of PRIORITY unsecured claim: 11 U.S.C. § 507(a) (_____)			

Part 2: List All Creditors with NONPRIORITY Unsecured Claims

3. List in alphabetical order all of the creditors with nonpriority unsecured claims. If the debtor has more than 6 creditors with nonpriority unsecured claims, fill out and attach the Additional Page of Part 2.

		Amount of claim
3.1	Nonpriority creditor's name and mailing address David & Lea Bailis 120 S. 31st Ave., Apt. 5404 Omaha, NE 68131	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: warrants
		\$ 73,318.40
	Date or dates debt was incurred _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
	Last 4 digits of account number _____	
3.2	Nonpriority creditor's name and mailing address Booge Properties PO Box 494 South Sioux City, NE 68776	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: warrants
		\$ 73,318.40
	Date or dates debt was incurred _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
	Last 4 digits of account number _____	
3.3	Nonpriority creditor's name and mailing address D.A. Davidson, Attn: John Kuehl 1111 N. 102nd Court, #300 Omaha, NE 68114	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: warrants
		\$ 1,200,049.31
	Date or dates debt was incurred _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
	Last 4 digits of account number _____	
3.4	Nonpriority creditor's name and mailing address Michael Devereaux 12942 Old Cherry Road Omaha, NE 68137	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: warrants
		\$ 53,683.99
	Date or dates debt was incurred _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
	Last 4 digits of account number _____	
3.5	Nonpriority creditor's name and mailing address Lynn & Bonnie Grant 8520 E Via Montoya Scottsdale, AZ 85255	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: warrants
		\$ 93,895.37
	Date or dates debt was incurred _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
	Last 4 digits of account number _____	
3.6	Nonpriority creditor's name and mailing address Stanley & Mary Flegle 2302 Georgetown Place Bellevue, NE 68123	As of the petition filing date, the claim is: Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: warrants
		\$ 29,327.36
	Date or dates debt was incurred _____	Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
	Last 4 digits of account number _____	

Part 2: Additional Page

Copy this page only if more space is needed. Continue numbering the lines sequentially from the previous page. If no additional NONPRIORITY creditors exist, do not fill out or submit this page.

Amount of claim

3.7 Nonpriority creditor's name and mailing address

Margaret Jones

432 N. 38th Street

Omaha, NE 68131

As of the petition filing date, the claim is:
Check all that apply.

Contingent
 Unliquidated
 Disputed
 Liquidated and neither contingent nor disputed

\$ 73,318.40

Basis for the claim: warrants

Date or dates debt was incurred

Last 4 digits of account number

Is the claim subject to offset?

No
 Yes

3.8 Nonpriority creditor's name and mailing address

Timothy L. O'Neill, Trustee

Attn: Pam Blackman
PO Box 1709

Council Bluffs, IA 51502

As of the petition filing date, the claim is:
Check all that apply.

Contingent
 Unliquidated
 Disputed

\$ 58,654.72

Basis for the claim: warrants

Date or dates debt was incurred

Last 4 digits of account number

Is the claim subject to offset?

No
 Yes

3.9 Nonpriority creditor's name and mailing address

Richard B. Peterson, Trustee

1036 Skyline Drive
Elkhorn, NE 68022As of the petition filing date, the claim is:
Check all that apply.

Contingent
 Unliquidated
 Disputed

\$ 14,663.69

Basis for the claim: warrants

Date or dates debt was incurred

Last 4 digits of account number

Is the claim subject to offset?

No
 Yes

3.10 Nonpriority creditor's name and mailing address

RBC Wealth Management

ATTN: P & S Dept.

60 South 6th Street, #1600

Minneapolis, MN 55402

As of the petition filing date, the claim is:

Check all that apply.

Contingent
 Unliquidated
 Disputed

\$ 647,474.98

Basis for the claim: warrants

Date or dates debt was incurred

Last 4 digits of account number

Is the claim subject to offset?

No
 Yes

3.11 Nonpriority creditor's name and mailing address

Louis Rich Family Trust

17735 NO 131 Way

Scottsdale, AZ 85259

As of the petition filing date, the claim is:

Check all that apply.

Contingent
 Unliquidated
 Disputed

\$ 58,654.72

Basis for the claim: warrants

Date or dates debt was incurred

Last 4 digits of account number

Is the claim subject to offset?

No
 Yes

Part 2: Additional Page

Copy this page only if more space is needed. Continue numbering the lines sequentially from the previous page. If no additional NONPRIORITY creditors exist, do not fill out or submit this page.

Amount of claim

3.12 Nonpriority creditor's name and mailing address

JG Verzal

PO Box 7096

Omaha, NE 68107

As of the petition filing date, the claim is:

Check all that apply.

- Contingent
- Unliquidated
- Disputed
- Liquidated and neither contingent nor disputed

\$ 14,663.69

Basis for the claim: warrants

Date or dates debt was incurred

Last 4 digits of account number

Is the claim subject to offset?

- No
- Yes

3.13 Nonpriority creditor's name and mailing address

Mike Vomacka

2115 S. 51st Street

Omaha, NE 68106

As of the petition filing date, the claim is:

Check all that apply.

- Contingent
- Unliquidated
- Disputed

\$ 18,879.24

Basis for the claim: warrants

Date or dates debt was incurred

Last 4 digits of account number

Is the claim subject to offset?

- No
- Yes

3.14 Nonpriority creditor's name and mailing address

As of the petition filing date, the claim is:

Check all that apply.

- Contingent
- Unliquidated
- Disputed

\$ _____

Basis for the claim: _____

Date or dates debt was incurred

Last 4 digits of account number

Is the claim subject to offset?

- No
- Yes

3.15 Nonpriority creditor's name and mailing address

As of the petition filing date, the claim is:

Check all that apply.

- Contingent
- Unliquidated
- Disputed

\$ _____

Basis for the claim: _____

Date or dates debt was incurred

Last 4 digits of account number

Is the claim subject to offset?

- No
- Yes

3.16 Nonpriority creditor's name and mailing address

As of the petition filing date, the claim is:

Check all that apply.

- Contingent
- Unliquidated
- Disputed

\$ _____

Basis for the claim: _____

Date or dates debt was incurred

Last 4 digits of account number

Is the claim subject to offset?

- No
- Yes

Part 4: Total Amounts of the Priority and Nonpriority Unsecured Claims

5. Add the amounts of priority and nonpriority unsecured claims.

	Total of claim amounts
5a. Total claims from Part 1	5a. \$ 0.00
5b. Total claims from Part 2	5b. + \$ 2,409,902.27
5c. Total of Parts 1 and 2 Lines 5a + 5b = 5c.	5c. \$ 2,409,902.27